

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.
100//586319

FILING DATE

APPLICANT(S)

Art. 19

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT			AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
	1	/	/	/	/	/	51						
2	/						52						
3	/						53						
4	/		/				54						
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45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.	1		4										
TOTAL DEP.	21	←	8	←									
TOTAL CLAIMS	28		12										